



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



Applicant: Ole SIBBESEN et al.

Title: PROTEINS

Prior Appl. No.: 09/869,155

Prior Appl. Filing Date: 10/01/2001

Examiner: Unassigned

Art Unit: 1652

CONTINUING PATENT APPLICATION
TRANSMITTAL LETTER

Mail Stop PATENT APPLICATION
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is a:

☒ Continuation ☐ Division ☐ Continuation-In-Part (CIP)

of the above-identified copending prior application in which no patenting, abandonment, or termination of proceedings has occurred. Priority to the above-identified prior application is hereby claimed under 35 U.S.C. § 120 for this continuing application. The entire disclosure of the above-identified prior application is considered as being part of the disclosure of the accompanying continuing application and is hereby incorporated by reference therein.

Enclosed are:

- ☒ Application Data Sheet (37 CFR 1.76) (3 pages).
- ☒ Preliminary Amendment, including Abstract (8 pages).
- ☒ Specification and Claim(s) (80 pages).
- ☒ Formal drawings (22 sheets, Figures 1-31).
- ☒ Copy of Declaration and Power of Attorney (6 pages).
- ☒ Submission of Sequence Listing under 37 C.F.R. § 1.821(e) (2 pages).

13281 U.S. PTO
07/25/03

Atty. Dkt. No. 078883-0165

☒ Copy of Statement to Support Filing and Submission in Accordance with 37 C.F.R. §§ 1.821-1.825 filed 10/01/2001 (2 pages).

☒ Copy of Sequence Listing filed 10/01/2001 (11 pages).

The filing fee is calculated below:

	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
Basic Fee				\$750.00	\$750.00
Total Claims:	15	- 20	= 0	x \$18.00	= \$0.00
Independents:	5	- 3	= 2	x \$84.00	= \$168.00
If any Multiple Dependent Claim(s) present:			+	\$280.00	= \$0.00
				SUBTOTAL:	= \$918.00
<input type="checkbox"/>				Small Entity Fees Apply (subtract ½ of above):	= \$0.00
				TOTAL FILING FEE:	= \$918.00

☒ A check in the amount of \$918.00 to cover the filing fee is enclosed.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date July 25, 2003

By Michele M. Simkin

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